

What happens when someone becomes temporarily unemployed?

Temporary Unemployment

Persons on the Working Healthy program are more likely to experience temporary lapses in employment due to their health conditions or other extenuating circumstances. The agency wants to support these consumers in recuperating and returning to work or support them as they attempt to find other positions. Also this policy applies to those consumers who may fall below the earned income disregard of \$65.

A consumer may remain on the Working Healthy program for a period of up to 9 months, beginning with the month following the month of unemployment or when it is determined their income is below the earned income disregard, as long as the consumer actively cooperates with the Benefits Specialist in establishing an unemployment plan. The EES worker will send notice N744 to the consumer and 3161 to the Benefits Specialist anytime a loss of employment occurs.

If the consumer does not cooperate with the Benefits Specialist in determining an unemployment plan, the Benefits Specialist will send a 3161 to the EES worker and the worker will terminate Working Healthy coverage and determine continued eligibility under QMB, LMB, Part D Subsidy, or the MS program.

Working Healthy coverage terminates at the end of the ninth month if the consumer has not returned to work or income is not above the earned income disregard. Coverage under the MS, QMB, LMB, or Part D Subsidy programs must be considered for the consumer.

Consumers who report a loss of employment generally will have a decrease in income and their premium would be recalculated the month after the month the loss is reported. However, additional income due to the loss of employment is possible (e.g. unemployment, disability payments from employer, and reinstated Social Security benefits) and this should be considered in factoring the premium obligation following a reported loss of employment. Eligibility and premium recalculation should not be delayed just because of anticipated income sources.

1/2009

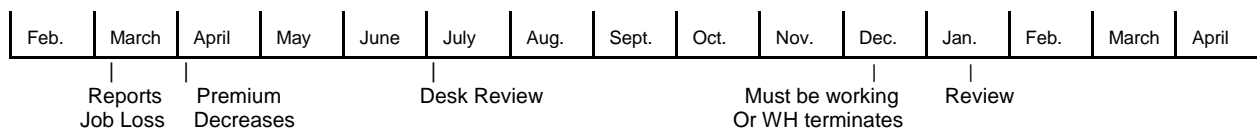
Example A: A Working Healthy consumer reports to their worker on 2/5 that they have experienced an increase in their symptoms of Multiple Sclerosis and the doctor has ordered them to stop working until their condition improves. Their boss has promised him that he will hold his position open until he can return, but because it is such a small company he can not afford to pay any disability leave for the time off.

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|---------------------|----------------------|-------------|-----|------|------|------|-------|------|--------|----------------------------------|------|------|-------|-------|
| Feb. | March | April | May | June | July | Aug. | Sept. | Oct. | Nov. | Dec. | Jan. | Feb. | March | April |
| Reports
job loss | Premium
decreases | Desk Review | | | | | | | Review | Must be working or WH terminates | | | | |

- The worker removes the alert for the unemployment extension ending and sends a 3161 to the Benefits Specialist.
- The worker does not change the income as premiums are only increased at the desk review or redetermination.
- At the review in November, the worker redetermines the premium based on all of the current verifications.

Example C: A Working Healthy consumer reports to their worker on 3/09 that they were fired from their job today. They respond that they would like to find another job as soon as possible.

- The worker adjusts the income for April, figures new premium obligation, and sends notices.
- A 3161 is sent to the Benefits Specialist to inform them of the job loss and the need for temporary unemployment plan.
- Benefits Specialist notifies worker a plan is developed.
- An alert is set on WOAL for Mid-December that the 9 month unemployment extension ends 12/31.
- The consumer remains scheduled for a desk review in July and his certification period ends January.



Example D: Let's say the above consumer's premium was reduced to \$0 in April as he doesn't have income above 100% of poverty without any earnings. In June, the worker receives a 3161 from the Benefits Specialist that the consumer failed to cooperate in establishing an employment plan.

- The worker removes the Working Healthy codes from SEPA and PICK and determines if the consumer is eligible for QMB, LMB, Part D Subsidy or MS Independent Living.
- Appropriate notices are sent to the consumer and Benefits Specialist.
- The Benefits Specialist is removed from the ADAD screen the next day.

Note: There are seven Benefits Specialists covering separate regions of the state. For many consumers, contacting the Benefits Specialist may be a long distance phone call. It is encouraged that when the EES worker knows the consumer needs to talk to the Benefit Specialist, they forward the consumer's name and number via electronic mail to the Benefits Specialist. Then the Benefit Specialist can contact the consumer and save them the long distance phone call.

Working Healthy Notes

